

FORM
5Rev
10/14**State of Colorado**
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402195832

Date Received:

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10433

Contact Name: Joan Proulx

Name of Operator: LARAMIE ENERGY LLC

Phone: (970) 263-3641

Address: 1401 SEVENTEENTH STREET #1401

Fax:

City: DENVER

State: CO

Zip: 80202

Email: jproulx@laramie-energy.com

API Number 05-045-23985-00

County: GARFIELD

Well Name: CC Federal

Well Number: 0697-04-05E

Location: QtrQtr: Lot 12

Section: 4

Township: 6S

Range: 97W

Meridian: 6

FNL/FSL

FEL/FWL

Footage at surface: Distance: 1923 feet

Direction: FNL

Distance: 937 feet

Direction: FEL

As Drilled Latitude: 39.557544

As Drilled Longitude: -108.218806

GPS Data:

Date of Measurement: 08/30/2019

PDOP Reading: 2.1

GPS Instrument Operator's Name: T Sherrill

FNL/FSL

FEL/FWL

** If directional footage at Top of Prod. Zone

Dist: 1140 feet

Direction: FNL

Dist: 1245 feet

Direction: FEL

Sec: 4

Twp: 6S

Rng: 97W

FNL/FSL

FEL/FWL

** If directional footage at Bottom Hole

Dist: 1197 feet

Direction: FNL

Dist: 1322 feet

Direction: FEL

Sec: 4

Twp: 6S

Rng: 97W

Field Name: GRAND VALLEY

Field Number: 31290

Federal, Indian or State Lease Number: COC 056830

Spud Date: (when the 1st bit hit the dirt) 06/03/2019

Date TD: 06/07/2019

Date Casing Set or D&A: 06/08/2019

Rig Release Date: 08/29/2019 Per Rule 308A.b.

Well Classification:



Dry



Oil



Gas/Coalbed



Disposal



Stratigraphic



Enhanced Recovery



Storage



Observation

Total Depth MD 9567

TVD** 9511

Plug Back Total Depth MD 9461

TVD** 9400

Elevations GR 8609

KB 8639

Digital Copies of ALL Logs must be Attached per Rule 308A



List Electric Logs Run:

Emulation (Pulsed Neutron, Emulated OH Log), PN (Pulsed Neutron, Gamma Ray, Casing Collar), RBL (Radial Cement Bond, Gamma Ray, Casing Collar), Mud

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	26	16	36.9	0	80	100	0	80	CALC
SURF	14+3/4	9+5/8	36	0	2,660	1,173	0	2,660	CALC
1ST	8+3/4	4+1/2	11.6	0	9,557	1,505	2,316	9,557	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom
	SURF		296	0	2,660

Details of work:

6/8/19 Pumped 6.3 bbls, 30 sxs, 15.6 ppg on parasite line.

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH	2,957	4,744	NO	NO	
WASATCH G	4,744	5,269	NO	NO	
FORT UNION	5,269	6,491	NO	NO	
OHIO CREEK	6,491	6,911	NO	NO	
WILLIAMS FORK	6,911	8,958	NO	NO	
CAMEO	8,958	9,397	NO	NO	
ROLLINS	9,397	9,891	NO	NO	
CORCORAN	9,891		NO	NO	

Operator Comments:

No open-hole logs were run in this well. Open-hole logs were run in the CC 0697-04-08E, 045-23987: Sandstone_Caliper (Resistivity, GR, Caliper), Sandstone Induction (Induction, GR), Sandstone_Nuclear (Thermal Neutron Porosity, GR, Caliper), Sandstone TCOM (Triple Combo)

A 1.90" 2.75# J-55 parasite string was set with the mandrel at 2,525'.

TPZ is estimated at the TOG estimate of 7478' as the well has not yet been completed. The estimated completion date for the well is prior to 12/15/2019. The actual TPZ footages will be provided on the Form 5A comments after the well is completed.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Joan Proulx

Title: Regulatory Analyst

Date: _____

Email: jproulx@laramie-energy.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
402195862	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402195863	Directional Survey **	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
402195866	PDF-MUD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195867	LAS-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195868	PDF-PULSED NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195873	LAS-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195874	PDF-GAMMA RAY	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195880	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402195883	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402215866	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

